

## DENMARK TECHNICAL COLLEGE OFFICE OF RESIDENTIAL LIFE ~ P.O. BOX 327 ~ DENMARK, SC 29042 PH. 803.793.5134 ~ FAX. 803.793.5942

## HOUSING APPLICATION

Term applying for housing: Print Clearly or Type Fall Spring Summer 20 Legal Name: \_\_\_ Middle Preferred Name (if different): Street Address: Date of Birth: \_\_\_\_/\_\_\_/ Sex: Male Female Home Ph.: (\_\_\_\_\_\_ Cell Ph.: (\_\_\_) \_\_\_\_-Anticipated Major:\_\_\_\_\_ Email: Have you ever been convicted of a Felony? Yes No if yes, please attach an explanation Mother's Name:\_\_\_\_\_ Father's Name:\_\_\_\_\_ (Or Guardian) (Or Guardian) ( ) --\_\_\_-Home Ph.: Home Ph.: Cell Ph.: Cell Ph.: LIVING & LEARNING QUESTIONS The information you provide here will assist us in assigning roommates. Please answer all questions honestly and thoroughly. This information is confidential. What qualities do you prefer in a Do you consider yourself a: Somewhere in between Night Owl roommate? Morning person □ Religious □ Athletic How do you keep your room? □ Same Major □ Involved Somewhat unorganized Somewhat organized Messy Neat & Orderly □ Outgoing □ Studious □ Quiet For studying, do you prefer: Ouiet Moderately quiet Moderately noisy Noisy No preference How important are the following activities to you? What type (s) of music do you enjoy: 1-Not Important 5-Very Important □Alternative  $\square Rock$ □Jazz/R & B □Celtic/Instrumental Participating in residence hall activities...... 1 □Christian/Gospel □Pop □Classic Rock □Rap □Classical □Latino □Country □Hip-Hop Sign & date the Student Housing Contract Agreement enclosed with this application and return it with your \$25.00 non-refundable housing deposit & \$50.00 refundable breakage fee to the Office of Residential Life. For Office Use Only Housing Application: Financial Aid Award Letter Deposit & Breakage Fee Room & Board Fees Paid Admission Acceptance Housing Assignment Health Form (s) (w/proof of immunizations)

Student ID#:\_